

CARE4U2DAY Limited

Care4u2day Limited

Inspection report

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Website: www.care4u2day.co.uk

Date of inspection visit:

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06 January 2020

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20 February 2020

Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Care4u2day Limited is a domiciliary care agency providing personal care. At the time of the inspection they were supporting 24 people.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided.

People's experience of using this service and what we found

People consistently told us they were safe and trusted their care staff. Staff had a good understanding of what to do to help make sure people were protected from harm and knew how to raise an alert or any concerns they may have had. Risks to people's health and welfare were identified and actions taken to mitigate the risk. People received their prescribed medicines safely, from staff who had completed the required training and had their competency to do so assessed. Suitable numbers of appropriately recruited staff were available to meet people's needs. Staff adhered to the provider's infection control policy and used the appropriate equipment and clothing, when required. The agency reported, investigated and recorded accidents and incidents and safeguarding concerns.

Staff were trained, supervised, and appraised. People and their relatives praised staff's knowledge and felt they had the necessary skills to meet people's needs. Staff promoted people's health by supporting people to access health care services when required. They supported people with eating and drinking where this was identified as a need in their care plan. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People told us they were consistently treated with kindness and respect. People were supported to express their views about their care and their wishes were respected. Staff acknowledged and respected people's privacy, dignity and confidentiality. All staff we spoke with demonstrated kindness and spoke respectfully about the people they supported.

People had their needs assessed, reviewed and received personalised care that was responsive to their needs and preferences. People were given enough information to make their own decisions and were given choices and support to follow their routines. Staff enabled people to raise concerns and complaints, which were used to improve people's experience of the care they received.

The service had an open, honest and positive culture with transparent management and leadership. There were quality assurance systems in place to help monitor the quality of the service and identify any areas which might require improvement. There was a clear focus on continually seeking to improve the service people received and maintaining high standards of care. Staff told us they enjoyed working at the service

and that they were well supported by the management team.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was Good (published 23 May 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Care4u2day Limited

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was completed by one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a domiciliary care agency and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 16 December 2019 and ended on 6 January 2020. We visited the office location on 17 December 2019.

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What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with four people who used the service and received feedback from three relatives about their experience of the care provided. We spoke with six members of staff including the provider, registered manager and care staff.

We reviewed a range of records. This included three people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data, quality assurance records, feedback and meeting minutes.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People felt safe using the service. One person told us, "The carers are all good, they are a professional outfit and I think they look after me very well and keep me safe."
- Relatives also thought the service was safe. One relative said, "Yes, we do feel the care provided is safe and the staff appear to be aware of how to keep people safe."
- Staff had a good understanding of what to do to help make sure people were protected from harm and how to raise an alert or any concerns they may have had. They told us they had received safeguarding training and records confirmed this.
- The provider had policies in place to keep people safe, such as safeguarding and whistleblowing.

Assessing risk, safety monitoring and management

- As part of assessment and care planning, any risks to people's health and welfare were identified and actions taken to mitigate the risk. These included the risks associated with moving and handling tasks, the risk of falls, skin damage and weight loss. The service referred people to other health or social care professionals when appropriate for support and guidance.
- Risk assessments were regularly reviewed and updated as people's needs changed.
- Staff demonstrated a good understanding of the guidance in place to help them understand how to support people safely. An environmental safety risk assessment was also completed to ensure staff were working safely in people's homes. One relative told us, "Care provided is very safe and staff have been quick to point out in a respectful manner if they have felt any changes needed to be made at [relative's] home to ensure [their] ongoing safety."

Staffing and recruitment

- People and relatives confirmed that enough suitable staff were consistently deployed to meet people's needs. One person told us, "If it wasn't for the care they give me, me or my [partner] would possibly be in a home. I think in a little way they keep us together." A relative told us, "There are always enough staff and they always tend to be relatively prompt with their arrival. Should there be any problems they always advise the family promptly."
- Staff confirmed, and records showed, the service had enough staff to meet people's needs and to manage changes to the services required.
- The provider had a thorough staff recruitment process and records demonstrated that it was followed. References were taken up and Disclosure and Barring service security checks carried out prior to staff starting in post.

Using medicines safely

- People were encouraged to manage their own medicines where this was possible. If they were unable to do this, the level of support they needed from staff was decided following an assessment. For those who needed support, the exact tasks to be completed were recorded in their care plan.
- All staff completed safe medicines administration training before they were able to support people with their medicines. Senior staff undertook competency checks to ensure they always followed safe practice.
- Medicine Administration Records were audited regularly. If any errors were identified, these were followed up with staff and records kept of action taken.

Preventing and controlling infection

- The provider had infection prevention and control policies in place.
- Staff received training in infection control and had access to personal protective equipment such as disposable gloves and aprons.
- Senior members of staff monitored members of care staff compliance with infection control policies and procedures as part of their spot checks.

Learning lessons when things go wrong

- Any accidents and incidents were recorded and had been reviewed by the registered manager. Actions included changes to people's support plans and referrals to external health and social care professionals where necessary.
- Monthly audits were completed to identify any trends. This enabled the service to take any action that would help prevent a reoccurrence.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People were always encouraged to make their own choices and those we spoke with confirmed this. One person told us, "When they did the first assessment there were a lot of questions, mostly around how I thought things needed to be done. The timing of my care is at our mutual agreement and the routine is how I wanted things to be done. I know I can ask any time for things to change and they would do that."
- The registered manager completed detailed assessments to make sure the service was able to meet people's health, care and medical needs. These assessments considered all aspects of people's lives and were regularly reviewed and updated. One relative told us, "I have been completely involved all the time. The initial recommendation on the level of care was given by the [Local Authority] at hospital, that was put into place immediately on my [relatives] discharge to home and then it was subsequently reviewed by me with Care4u2day a couple of weeks later."
- People consistently told us they received effective care and support from staff who knew how they liked things done.
- Staff demonstrated a good understanding of people's needs and the support they needed.

Staff support: induction, training, skills and experience

- People and their relatives told us they had confidence in the staff and commented how they were well trained. One person told us, "The carers seem to be very well trained, I haven't found any faults in the time they have been coming." A relative told us, "I am very happy and reassured with all of the staff that have visited my [relative] so far. Many have been carers for a long time and those that are fairly new to caring are given very good training by [registered manager]."
- New staff had completed an induction process that helped them to acquire the skills and confidence to carry out their role effectively. This included a period of shadowing senior staff members to introduce them to people and demonstrate how they wished their care to be delivered.
- Staff told us they received good support and received this informally as well as via formal one to one supervision sessions regularly throughout the year. They received an annual appraisal of their performance and also had observational checks of their practice.
- The training matrix identified when training required updating and showed staff training was up to date.

Supporting people to eat and drink enough to maintain a balanced diet

- People were supported by care staff to have enough food and drink where this was identified as a care and support need. The level of support the person required was detailed in their plan of care.
- Staff protected people from the risk of poor nutrition, dehydration, swallowing problems and other medical conditions, by consistently following guidance from relevant professionals.

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- Staff worked together to ensure that people received consistent, coordinated care and support, when they were referred to or moved between different services.
- The service worked well with other organisations. Care plans and records showed effective liaison with other health and social care professionals and other care services.
- People were supported to access community services and attend appointments where needed.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- People consistently told us they had consented to the care and support detailed within their care plans. One person told us, "They explain what they need to do, or when we change the care plan I will sign once they have explained to say I am happy for them to do this or that."
- One relative told us, "My [relative] is asked for [their] consent at all times and all the carers know what my [relatives] wishes are as this was established with [registered manager] and all the carers in the first couple of weeks."
- Staff we spoke with understood their responsibilities regarding the MCA.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People experienced caring relationships with staff who consistently treated them with kindness in their day-to-day care. One person told us, " They are all very friendly and very nice, very sensitive and gentle." Another person told us, "It's a very caring company, the managers set the professional approach and the carers seem to follow that."
- Relatives consistently praised the caring attitude of the staff and made comments such as, " They are all really kind, sensitive and caring. I am very pleased and satisfied with the level of care they all give" and "The care staff are kind and appear competent. They appear to show empathy and concern for an older person."
- The registered manager completed observations and sought feedback from people to ensure staff delivered care in a kind and compassionate manner.
- People's diverse needs were reflected in their support plans.

Supporting people to express their views and be involved in making decisions about their care

- People's care plans recorded that they and their relatives were involved in the decision-making process about the care and support they would receive. One person told us, "Every 4 to 6 weeks they update the care plan. They came around a couple of weeks ago to update it. I am always part of the discussion, it's always a mutual thing and on a professional basis."
- The registered manager and staff understood the importance of involving people in decision making. We saw that discussions were held with people when their wishes or needs changed.
- There was regular communication between the office and people, where people were encouraged to express their views. This information was used to develop individual support plans, where appropriate, and how the service delivered care.

Respecting and promoting people's privacy, dignity and independence

- People told us they were treated with respect and care workers promoted their privacy and dignity. One person told us, "I think they look after me well, respect me as a person, listen to me and treat me in a dignified way." Another person told us, "I am quite happy with how they do things, and they make sure I am covered up, dignified. They are making sure my care time is private."
- People's care plans promoted their independence and staff encouraged people. One person told us, "It is not easy letting others help you dress or prepare a meal, but the approach of the staff is such that I don't feel like I am losing my freedom or independence."
- The provider stored people's confidential information securely in accordance with legislation. This information was readily available when required to those authorised to have access to it.

- The agency had a confidentiality policy and procedure that staff understood and followed.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received a personalised service that met the care and support needs as agreed at assessment or review. One person told us, "I think I am very fortunate to have such a flexible and customer focused company looking after me." Another person told us, "When I came back from hospital they had seen me and checked everything was alright and if I needed anything different. I didn't, and my plan didn't change but it was nice to know they automatically checked."
- People's care plans recorded their decisions, the tasks they required support with and preferred daily routines. They also highlighted areas where staff could encourage people to be independent.
- Staff had a good knowledge of the needs and preferences of the people.
- The service involved people and their advocates in planning their care, drawing up their plans and reviewing them. One relative told us, "We did have an assessment prior to using the service. We were involved. We have been kept updated if there are changes."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- An assessment of each person's communication needs was completed, and their care plan detailed any specific requirements they had. One relative told us, "Our [relative] appears comfortable in their presence and has pleasant conversation with them. They communicate very well, clearly and articulate."
- Staff told us about the different ways they communicated with people, including those people with limited communication or hearing impairments.
- People were provided with information in a way they could understand which helped them make decisions about their care.

Improving care quality in response to complaints or concerns

- People and their relatives were given the opportunity to give their feedback on the service during care reviews, meetings and surveys. This feedback was consistently positive, with many complimentary comments about the support provided.
- People and their relatives were aware of the complaints process and knew how to use it. One person told us, "I have never had to make a complaint, I feel no need to, but I know I can go to the managers or the big boss if I need to." A relative told us, "Yes, I do know how to raise a complaint but so far have not had to do so."

- At the time of inspection, no recent complaints had been made. The system in place ensured that all complaints would be recorded and responded to promptly.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People received a service where caring values were embedded into the leadership, culture and staff practice.
- Staff felt engaged in the service and were committed to ensuring people came first and received individualised care which achieved good outcomes for them.
- The service's culture was open, honest and positive. The vision and values were clearly set out, staff understood them, and people said they were reflected in their working practices. They had been explained during induction training and revisited at staff meetings.
- It was evident the service had a good track record and there was a commitment from the whole staff team to maintain standards and make further improvements for people using the service.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong; Continuous learning and improving care

- The registered manager was fully aware of their responsibilities under the duty of candour. They understood the importance of honesty and transparency, when investigating something that went wrong.
- The service had good processes in place to communicate with families, the Care Quality Commission (CQC) and other relevant agencies.
- The provider, registered manager and other senior staff were all committed to getting it right. When lessons could be learned, the service took action to complete the necessary improvements.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- There was a clear management structure within the service. The registered manager was highly visible and provided clear and direct leadership.
- The management team had the skills, knowledge, and experience to lead effectively. Staff told us they felt respected, valued and well supported. There were regular staff meetings, these included discussions of good practice and ways the service could improve.
- At this inspection there were clear quality assurance and governance processes in place, which were effectively operated by the registered manager and overseen by the provider. These audits accurately reflected the quality of the records and identified any areas for improvement.
- The registered manager was aware of their responsibilities to report significant events to the Care Quality Commission (CQC) and other agencies. Notifications had been received in a timely manner which meant

that the CQC could check that appropriate action had been taken.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People and their relatives felt engaged with the service. One relative told us, "Always and completely involved, there is constant cooperation involved in my [relatives] care."
- People and their relatives were encouraged to express their views, and this was confirmed by those we spoke with.
- The agency provided the opportunity for people and their relatives to give their views about the service, via telephone interviews, visits to people, and feedback questionnaires and surveys. The agency used the feedback information to shape the service provided so people's needs could be better met.
- Staff consistently told us the registered manager valued their views, which they were encouraged to share during supervisions, team meetings and at any time they needed to talk.

Working in partnership with others

- The service worked closely with other professionals and services to promote positive outcomes for people.
- Staff worked together to ensure that people received consistent, coordinated care and support.
- People consistently praised the support they received when being referred to healthcare professionals and when being admitted or discharged from hospital.